DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Corrected

Facility Information

Facility Name: PHOENIX HOUSE (390092)

Address: 129 SHEFFIELD DR, RACINE, WI 53402

License Status: REGULAR

Licensed/Certified/Registered 05/31/1996

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0096451 End Date: 01/31/2006 Type: ABBREVIATED Purpose: SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008897 Served 03/08/2006

Deficiencies Cited Subject Area Subject Area Verified

88.07(2)(b) SERVICES DIRECTED TO GOALS

88.07(2)(b)5 MONITORING HEALTH 88.07(2)(b)6 NOTIFICATION OF CHANGES

Survey ID: 0092842 End Date: 06/21/2004 Type: ABBREVIATED Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 03/06/2006 SOD #10008897 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

COMPLY WITH REQUIREMENT

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PROGRAM SERVICES

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

Complaint History Date Complaint Received: 10/26/2005 Date Investigation Completed: 01/31/2006 Subject Area(s) Result SOD# LICENSED CAPACITY /CLASS OF LICENSE NOT SUBSTANTIATED RESTRAINTS NOT SUBSTANTIATED PROGRAM SERVICES SUBSTANTIATED 10008897 Date Complaint Received: 10/05/2005 **Date Investigation Completed: 01/31/2006** Subject Area(s) Result SOD# **SUPERVISION** NOT SUBSTANTIATED PROGRAM SERVICES **SUBSTANTIATED** 10008897 Date Complaint Received: 07/12/2005 Date Investigation Completed: 01/31/2006 Subject Area(s) SOD# Result RESIDENT RIGHTS NOT SUBSTANTIATED

0008897

SUBSTANTIATED

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